## PART B - FEE(S) TRANSMITTAL

PART B - FEE(S) TR

Complete and this form, together with applicable fee(s), to: Mail

NOV 2 1 2007 W

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571) 273-2885

STRUCTION: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

08/17/2005

IP DEPARTMENT ALEXZA MOLECULAR DELIVERY CORPORATION 1001 EAST MEDADOW CIRCLE PALO ALTO, CA 94303

11/22/2005 SFELEKE2 00000125 10814690

01 FC:2501 02 FC:1504

7

700.00 OP

300.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name) (Signature (Date

FILING DATE FIRST NAMED INVENTOR CONFIRMATION NO. APPLICATION NO. ATTORNEY DOCKET NO. 10/814,690 03/31/2004 00027.04CON Joshua D. Rabinowitz 7242

TITLE OF INVENTION: DELIVERY OF ANTIEMETICS THROUGH AN INHALATION ROUTE

| APPLN. TYPE  | SMALL ENTITY   | ISSUE FEE  |   | PUBLICATION FEE   | TOTAL FEE(S) DUE   | DATE DUE   |
|--|--|--|---|---|--|--|
| nonprovisional   | YES  | \$700  |   | \$300   | \$1000   | 11/17/2005   |
| EXAMINER   |  | ART UNIT   |   | CLASS-SUB CLASS   |  |  |
| HAGHIGHATIAN, MINA   |  | 1616   |   | 424-045000  |  | •  |
| CFR 1.363).  Change of correspon Address form PTO/SB/:                                 | ce address or indication of "Fo<br>idence address (or Change of<br>122) attached.<br>ation (or "Fee Address" Indica<br>or more recent) attached. Use | Correspondence   | (1) the nation or agents (2) the nation registered 2 registered | nting on the patent front page, list<br>umes of up to 3 registered paten<br>OR, alternatively,<br>me of a single firm (having as a<br>attorney or agent) and the named<br>patent attorneys or agents. If<br>name will be printed. | t attorneys 1 <u>Swansor</u><br>member a 2 <u>Willian</u><br>es of up to | n & Bratschun, LLo                                       |
| PLEASE NOTE: Unles<br>recordation as set forth i<br>(A) NAME OF ASSIGN                 | -  | clow, no assignee<br>of this form is NO<br>(B          | data will app<br>T a substitute<br>) RESIDENG                   | T (print or type)  pear on the patent. If an assign for filing an assignment.  CE: (CITY and STATE OR COUPAIO Alto, Calif   | INTRY)   | ocument has been filed for                               |
| Please check the appropriat  | te assignee category or catego   | ries (will not be pr                                   | inted on the p  | patent): 🗖 Individual 🗖 Co  | rporation or other private gre   | oup entity Government                                    |
| 4a. The following fee(s) are   | e enclosed:  | 46   | . Payment of  | Fee(s):   |  |  |
| Issue Fee  |  |  | A check   | in the amount of the fee(s) is en   | closed.  |  |
| Publication Fee (No  | small entity discount permitte   | :d)  | Payment   | by credit card. Form PTO-2038   | is attached.   |  |
| Advance Order - # of Copies  |  |  |   |   |  | credit any overpayment, to opy of this form).            |
|  | s (from status indicated above<br>SMALL ENTITY status. See 1   | •  |   | cant is no longer claiming SMAI   |  |  |
| The Director of the USPTC<br>NOTE: The Issue Fee and I<br>interest as shown by the rec | ) is requested to apply the Issu<br>Publication Fee (if required) v<br>cords of the United States Pate   | e Fee and Publicate vill not be accepted and Trademark | tion Fee (if and if from anyon Office.                          | ny) or to re-apply any previously<br>e other than the applicant; a regi   | paid issue fee to the applica<br>stered attorney or agent; or th         | ntion identified above.<br>ne assignee or other party in |
| Authorized Signature   | Darles St  | K Ch   |   | Date XM   | ember 17.  | 2005   |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name Darla G. Yoerg

Registration No. 48.053